

PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS

Name of the Facility (exactly as stated on the license) Topeka Zoo Camps			License # 73657	
Street Address of the Facility 635 SW Gage Blvd	City Topeka	Zip Code 66606	County Shawnee	

_____ may go to the following locations off the premises **with** adult supervision:

First and Last Name of Child or Youth

Place Blaisdell Family Pool	Street Address 4201 SW Reinisch ^{PKWY}	City Topeka	By Vehicle	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

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Signature of Parent or Guardian			Date Signed	

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Signature of Parent or Guardian			Date Signed	

FOR SCHOOL AGE CHILDREN OR YOUTH ONLY

I hereby authorize my **school age child** _____
First and Last Name of Child or Youth
Birth Date MM/DD/YYYY

To walk/bike to and from the following location(s) **without** adult supervision:

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	